

## APPLICATION FOR NOMINATION TO SERVICE ACADEMY

Name *(first, middle, last)* \_\_\_\_\_

Home Address *(street)* \_\_\_\_\_

Town & Zip Code \_\_\_\_\_ County \_\_\_\_\_

Mailing Address *(if different from above)* \_\_\_\_\_

E-mail Address \_\_\_\_\_

Home phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Parents' or Guardians' Names \_\_\_\_\_

High School \_\_\_\_\_ Phone \_\_\_\_\_

Address of High School \_\_\_\_\_

Date of Graduation from High School \_\_\_\_\_

GPA: \_\_\_\_\_ Rank in Class: \_\_\_\_\_ in a class of \_\_\_\_\_ students.

List in order of preference *only those academies to which you are applying* (leave others blank):

\_\_\_\_ Air Force      \_\_\_\_ Army      \_\_\_\_ Navy      \_\_\_\_ Merchant Marine

Are you seeking a nomination from another source, and if so, which source(s)? \_\_\_\_\_

Test Scores: SAT R&W \_\_\_\_\_ M \_\_\_\_\_ Date taken \_\_\_\_\_

SAT R&W \_\_\_\_\_ M \_\_\_\_\_ Date taken \_\_\_\_\_

ACT E \_\_\_\_\_ M \_\_\_\_\_ R \_\_\_\_\_ S \_\_\_\_\_ Date taken \_\_\_\_\_

Home of Record (for military dependents only) \_\_\_\_\_

### REFERENCES:

Please list the names and addresses of three people who will be writing a reference for you. One of these must be from a principal, dean, teacher or guidance counselor at your high school or college. You are responsible for having the references submitted to me, or your file cannot be considered.

a. \_\_\_\_\_

b. \_\_\_\_\_

c. \_\_\_\_\_

This application should be completed and returned by October 30th to:

Congresswoman Chellie Pingree  
2 Portland Fish Pier, Suite 304, Portland, Maine 04101  
Attn: Dorian Cole  
FAX: (207) 871-0720  
dorian.cole@mail.house.gov